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JUL 17 2006
IAP48
PATENT & TRADEMARK OFFICE

Practitioner's Docket No. 057878-11

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	Dinarello, et al.		
Application No.:	10/679,201	Group No.:	1647
Filed:	October 3, 2003	Examiner:	WOODWARD, C. M.

For: METHOD OF TREATMENT USING A CYTOKINE ABLE TO BIND IL-18BP TO INHIBIT THE ACTIVITY OF A SECOND CYTOKINE

CERTIFICATE OF MAILING (37 C.F.R. § 1.8)

I hereby certify that this correspondence:

1. Certificate of Mailing (1 pg.);
2. Transmittal Form (1 pg.);
3. Fee Transmittal in duplicate (2pp);
4. Supplemental Information Disclosure Statement (2 pp.);
5. IDS Form PTO-SB08 (1pg);
6. Copy of Russian Search Report 200500617 (2pp);
7. Copy of cited reference- B2 (56pp); and
8. Return Receipt Postcard

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Rebecca J Goodwin
Signature

Date: July 14, 2006

Rebecca J. Goodwin
(*type or print name of person certifying*)

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JUL 17 2006
PATENT & TRADEMARK OFFICE

PTO/SB/21 (09-04)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	66

Application Number	10/679,201
Filing Date	October 3, 2003
First Named Inventor	Charles A. Dinarello
Art Unit	1647
Examiner Name	WOODWARD, Cherie Michelle
Attorney Docket Number	057878-11

ENCLOSURES *(Check all that apply)*

- [X] Fee Transmittal Form
  - [ ] Fee Attached
- [ ] Amendment/Reply
  - [ ] After Final
  - [ ] Affidavits/declaration(s)
- [ ] Extension of Time Request
- [ ] Express Abandonment Request
- [X] Information Disclosure Statement
- [ ] Certified Copy of Priority Document(s)
- [ ] Reply to Missing Parts/ Incomplete Application
  - [ ] Reply to Missing Parts under 37 CFR 1.52 or 1.53
- [ ] Drawing(s)
- [ ] Licensing-related Papers
- [ ] Petition
- [ ] Petition to Convert to a Provisional Application
- [ ] Power of Attorney, Revocation Change of Correspondence Address
- [ ] Terminal Disclaimer
- [ ] Request for Refund
- [ ] CD, Number of CD(s) _____
  - [ ] Landscape Table on CD
- [ ] After Allowance Communication to TC
- [ ] Appeal Communication to Board of Appeals and Interferences
- [ ] Appeal Communication to TC **(Appeal Notice, Brief, Reply Brief)**
- [ ] Proprietary Information
- [ ] Status Letter
- [X] Other Enclosure(s) (please Identify below):

Certificate of Mailing; IDS Form PTO/SB08a; Copy of Russian Search Report; Copy of Cited Reference B2; and Return Receipt Postcard

Remarks

The Commissioner is hereby authorized to charge any fees that may be due and credit any overpayments to Deposit Account Number 19-2380.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	NixonPeabody LLP		
Signature			
Printed name	David S. Resnick		
Date	7/14/06	Reg. No.	34,235

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	Rebecca J. Goodwin		
Typed or printed name	Rebecca J. Goodwin	Date	July 14, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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PTO/SB/17 (01-06)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT ($) 180.00

Complete if Known	
Application Number	10/679,201
Filing Date	October 3, 2003
First Named Inventor	Charles A. Dinarello
Examiner Name	WOODWARD, Cherie Michelle
Art Unit	1647
Attorney Docket No.	057878-11

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 19-2380 Deposit Account Name: Nixon Peabody LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee ($)	Fee ($)	Fee ($)	Fee ($)	Fee ($)	Fee ($)	Fees Paid ($)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims		Extra Claims	Fee ($)		Fee Paid ($)
_____	- 20 or HP =	_____	x _____	=	_____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims		Extra Claims	Fee ($)		Fee Paid ($)
_____	- 3 or HP =	_____	x _____	=	_____

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims	
Fee ($)	Fee Paid ($)
_____	_____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof	Fee ($)		Fee Paid ($)
_____	- 100 =	_____	/ 50 =	_____ (round up to a whole number)	x 250.00	=	0.00

4. OTHER FEE(S)

	Fees Paid ($)
Non-English Specification, $130 fee (no small entity discount)	
Other (e.g., late filing surcharge): IDS fee	180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 34,235	Telephone
Name (Print/Type)	David S. Resnick		Date 7/14/06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

OIPE IAP48
JUL 17 2006
PATENT & TRADEMARK OFFICE

Practitioner's Docket No. 057878-11 ***PATENT***

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Dinarello, et al.
Application No.: 10/679,201 Group No.: 1647
Filed: October 3, 2003 Examiner: WOODWARD, C. M.
For: METHOD OF TREATMENT USING A CYTOKINE ABLE TO BIND IL-18BP TO INHIBIT THE ACTIVITY OF A SECOND CYTOKINE

CERTIFICATE OF MAILING (37 C.F.R. SECTION 1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage in an envelope addressed to MAIL STOP AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

July 14, 2006
Date

Rebecca J. Goodwin
(type or print name of person mailing paper)

Rebecca J Goodwin
Signature of person mailing paper

MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

In accordance with the provisions of 37 C.F.R. §1.56, 1.97, and 1.98, Applicants wish to bring to the Examiner's attention the following reference cited in the attached Form PTO/SB/08a, as cited in the Search Report of the related Russian application. All other documents cited in the Search Report have been previously cited.

REMARKS

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed:

___ (1) within three (3) months of the Filing Date or **before the mailing date of the First Office Action** on the merits; or

___ (2) within three months of the mailing date of the PCT International Search Report; or

07/18/2006 HMARZI1 00000037 192380 10679201
01 FC:1806 180.00 DA

X (3) after the period defined in (1) but before the mailing date of a **Final Rejection** or **Notice of Allowance**, and the requisite Certification or fee under Rule 1.17(p), namely **$180.00**, is included herein; or

___ (4) after the mailing date of a **Final Rejection** or **Notice of Allowance** but before the payment of the **Issue Fee**, and the requisite Certification, petition, and petition fee are included herein.

X A copy of the International Search Report is enclosed herewith.

It is respectfully requested that each of the documents shown on the attached form(s) PTO/SB/08a and b be made of record in this application.

Copies of these documents (CHECK ONE):

X are enclosed herewith; or

___ have been cited in the parent application, and are thus not being resubmitted herein.

___ Pursuant to 37 C.F.R. §1.98, copies of issued U.S. patents listed on the attached form PTO/SB/08, if any, are no longer required and therefore are not enclosed. These documents can be found in the U.S. PTO issued patents database.

FEE AUTHORIZATION

The Commissioner is authorized to charge fee deficiencies or credit overpayments associated with this submission to the NIXON PEABODY LLP Deposit Account No. 50-0850.

Date: July 14, 2006

Respectfully submitted,

David S. Resnick (Reg. No. 34,235)
NIXON PEABODY LLP
100 Summer Street
Boston, MA 02110-2131
(617) 345-6054

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JUL 17 2006
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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet	1	of	1

Complete if Known	
Application Number	10/679,201
Filing Date	October 3, 2003
First Named Inventor	Dinarello, et al.
Art Unit	1647
Examiner Name	WOODWARD, Cherie Michelle
Attorney Docket Number	057878-11

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No.[1]	U.S. Patent Document: Number - Kind Code[2] *(if known)*	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	A1	US- 5,945,310	08-31-1999	Young, et al.	
		US-			
		US-			
		US-			
		US-			

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No.[1]	Foreign Patent Document: Country Code[3] Number[4] Kind Code[5] *(if known)*	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T[6]
	B2	WO99/037772 A1	07-29-1999	Sims, et al.		

Examiner Signature		Date Considered	

OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No.[1]	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T[2]

Examiner Signature		Date Considered	

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

[1] Applicant's unique citation designation number (optional). [2] Applicant is to place a check mark here if English language Translation is attached.